HAWAII STATE ETHICS COMMISSION



1001 Bishop Street, Pacific Tower 970 P.O. Box 616, Honolulu, Hawaii 96809 Telephone: 587-0460 FAX: 587-0470

email: ethics@hawaiiethics.org

GIFTS DISCLOSURE STATEMENT							
(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due on June 30)							
NAME:	Robert N. Herkes	STATE POSITION: State Representative					
STATE AGENCY:	Hawaii State Legislature	STATE TEL. NO.: (808) 586-8400					

STATE MAILING ADDRESS: State Capitol

415 South Beretania Street, Room 419

Honolulu, Hawaii 96813

1 DONOR	2	DESCRIPTION OF GIFT	3	DATE REC'D	GIFT VA	LUE 5	AGG. VALUE
		I have nothing to disclose during this filing period.					
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Check here if you have attached additional sheets.

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

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June 8, 2005

SIGNATURE

DATE